

Form

## ND-1 Individual income tax return 2005

on federal return: 2. Married filing jointly 5 (Fill in only one) 3. Married filing separately	. Head of household . Qualifying widow(er) with dependent child	_	ace Required r Barcode
	Fill in only if applicable:  (See page 9)	Amended Extension	Fill in if this is a  COMPOSITE RETURN  If fiscal year filer, enter fiscal year end:
(See page 9)	Were you required to pay estimated federal income tax for 2005? (See page 9)	☐ Yes ☐ No	(See page 9) XX/XX/XXXX  US Dollars
D. Federal adjusted gross income from line 37 of Form line 4 of Form 1040EZ	orm 1040, line 21 of Form 104	40A, (sx) E	
<b>1. Federal taxable income</b> from line 43 of Form 1040, or line 6 of Form 1040EZ ( <i>If zero, see page 9 of instructi</i>		(SS) 1	
Additions			
2. Lump-sum distribution from Federal Form 4972	. (NA) 2		
<ul> <li>3. Loss from pass-through entity subject to North Dakota's financial institution tax (Attach statement from entity) _</li> <li>4. Adjustment to federal taxable income, if claiming planned gift credit (From Schedule PG, line 13)</li> </ul>			
<b>5.</b> Add lines 1, 2, 3, and 4		5	i
Subtractions			
<b>6.</b> Interest from U.S. obligations (Attach supporting statement)	(SN) 6		_
7. Net long-term capital gain exclusion (From worksheet on page 10 of instructions)	(NC) 7		-
<ul><li>8. Exempt income of a Native American</li><li>9. Benefits received from U.S. Railroad Retirement Board (Attach copy of Form RRB-1099, RRB-1099-R, or both)</li></ul>			
10. Income from pass-through entity subject to North Dakot financial institution tax (Attach statement from entity)	a's		=
11. Renaissance zone income exemption (Attach Schedule RZ)	(\$7) 11		-
<b>12.</b> New or expanding business income exemption under N.D.C.C. ch. 40-57.1 (Attach supporting statement)	(NH) 12		-
13. National Guard/Reserve member federal active duty pay exclusion ( <i>Attach copy of mobilization orders</i> )    14. Nonresident only: Servicemembers Civil Relief Act	(NI) 13		-
adjustment (See page 11 of instructions)  15. Human organ donor expense deduction			
(Attach supporting statement)  16. North Dakota taxable income. Subtract lines 6 th			-
If less than zero, enter 0		(ND) 16	,
17. Tax. Enter the tax as explained below:		(SB) 17	,
► If full-year resident, enter amount from Tax Ta	ble on page 18 of instruction	s. If you have farn	n income, see page 12 of instructions.

▶ If full-year nonresident or part-year resident, enter amount from Schedule ND-1NR, line 20.

## North Dakota Office of State Tax Commissioner

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Dept. 127, Bismarck, ND 58505-0550

— US Dollars ———	

<b>18.</b> Enter your <b>tax</b> from line 17 of <b>Credits</b>	Fpage 1			18 <u></u>	
<b>19.</b> Credit for income tax paid to ar (Attach Schedule CR)	nother state	(SD) 19			<u></u>
<b>20</b> . Family member care credit (Atta	ach Schedule FC)	(S2) 20 <sub>_</sub>			
21. Renaissance zone credit (Attack	h Schedule RZ)	(S3) 21			
<b>22.</b> Ag commodity investment cred of instructions) (Attach copy of	lit (from worksheet on page 11 f investment reporting form)	(NE) 22 <sub>_</sub>			
23. Seed capital investment credit ( of instructions) (Attach copy of	(from worksheet on page 12 f investment reporting form)	(NG) 23			
<b>24.</b> Credit for planned gift to qualif organization. ( <i>From Schedule H</i>	fied North Dakota nonprofit PG, line 7)	(NM) 24 <sub>-</sub>			<u></u>
<b>25</b> . Credit for biodiesel fuel supplies	er (Attach supporting statement)	(NN) 25			
<b>26.</b> Credit for biodiesel fuel seller (	(Attach supporting statement)	(NO) 26			
27. Net tax liability. Subtract li	ines 19 through 26 from line 18.	If less th	nan zero, en	ter 0 (s	E) 27
Withholding and/or tax al	Iready paid				
<ul><li>28. North Dakota withholding (Atta</li><li>29. Estimated tax paid, including experts 400 EXT and overpayments)</li></ul>		_			
<b>30.</b> Total payments. Add lines 28 at					30
Refund					
	esult is less than \$5.00, en				G) 31
<b>32.</b> Amount of line 31 that you war estimated tax	nt applied to your 2006	(SQ) 32			
<b>33</b> . Amount of line 31 that you wish	h to contribute to the Watchable				
<b>34</b> . Amount of line 31 that you wish	h to contribute to the Trees	·			
<b>35. Refund.</b> Subtract lines 32 thr					
To <b>direct deposit</b> your <b>a</b> refund, complete items a, b,	Routing number:				c. Type of account:
Tax Due	o. Account number:				
<b>36. Tax due</b> - If line 30 is LESS t	than line 27, subtract line 30 from			(S	Z) 36
37. Amount that you wish to contri	•			(3	
<b>38</b> . Amount that you wish to contril Program Trust Fund (but only if	bute to the Trees For ND f there is a tax due on line 36) _	·			
<b>39. Balance due</b> . Add lines 36, 3 Pay to: <b>ND State Tax Com</b> r	37, 38, and, if applicable, line 40 missioner				39
<b>40</b> . Interest on underpaid estimated	tax from Form 400-UT	(SO) 40			
	-			-	in a governmental matter, that this return, including an urn. <b>Privacy Act</b> - see inside front cover of booklet.
Your signature	Date	Your daytime	phone number	OPR ()	Tax Department use only
Spouse's signature			Date		
Signature of paid preparer	EIN/SSN/PTI	N	Date		
► Attach a copy of your ► Do not file a photoco	r 2005 federal income tax opy of this specially-colore te Tax Commissioner, 600	return ed return			